

0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	19538-05563 US
		First Named Inventor	Mark C. Pace
<i>COMPLETE IF KNOWN</i>			
		Application Number	PLEASE ASSIGN
		Filing Date	FEBRUARY 12, 2001
		Group Art Unit	UNKNOWN
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing		Examiner Name	UNKNOWN

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AUTOMATED SERVICE SCHEDULING SYSTEM

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) [] as United States Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations. § 1.56.

<p>I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 385(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.</p>					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:</p>					

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental sheet attached hereto.
60/245,903	November 3, 2000	

DECLARATION

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I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name Robert R. Sachs	Registration Number 42,120	Name Amir Raubvogel	Registration Number 37,070

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:

Robert R. Sachs
Fenwick & West LLP
Two Palo Alto Square
Palo Alto, CA 94306
U.S.A.

Telephone **(415) 875-2410** Fax **(415) 281-1350**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name	Mark	Middle Initial	C.	Family Name	Pace	Suffix e.g. Jr.
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Inventor's Signature	Date
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Residence: City	Las Vegas	State	NV	Country	USA	Citizenship	Malta
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Mailing Address	2916 Falling Spring Circle
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Mailing Address	
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City	Las Vegas	State	NV	Zip	89135	Country	USA
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Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Thomas		Middle Initial	W.	Family Name	Cook		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Linwood		State	NJ	Country	USA		Citizenship	U.S.
Mailing Address	2201 Brighton Drive								
Mailing Address									
City	Linwood		State	NJ	Zip	08221	Country	USA	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Mailing Address									
Mailing Address									
City			State		Zip		Country		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Mailing Address									
Mailing Address									
City			State		Zip		Country		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									